

UTILITY PATENT APPLICATION TRANSMITTAL (for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. P03,0381		2264 U.S. PTO 10/668855 09/23		
		First Named Inventor or Application Identifier				
		Torsten Niederdr�nk et al.				
		Express Mail Label No: EL 843733036 US				
ADDRESS TO: Commissioner for Patents Mail Stop Patent Application PO Box 1450 Alexandria, VA 22313-1450						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ACCOMPANYING APPLICATION PARTS				
1. <input checked="" type="checkbox"/> Specification Total Pages <u>14</u> 2. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Pages <u>6</u> 3. <input checked="" type="checkbox"/> Declaration and Power of Attorney Total Pages <u>2</u> a. <input type="checkbox"/> Executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 14 completed)</i> [Note Box 4 Below] i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		5. <input type="checkbox"/> Assignment Papers (cover sheet & documentation) 6. <input checked="" type="checkbox"/> Letter under 37 CFR 1.41(c). 7. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 8. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 9. <input type="checkbox"/> Amendment "A" Prior To Action 10. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 11. <input type="checkbox"/> Small Entity Status 12. <input type="checkbox"/> Certified Copy of Priority Document (s) <u>German Application No. 102 44 184.7 filed September 23, 2002</u> 13. <input type="checkbox"/> Other: _____				
If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:						
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____, Filed _____						
CLAIMS AS FILED						
	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) BASIC FEE 750.00	
	TOTAL CLAIMS	20	14			
	INDEPENDENT CLAIMS	03	2			
		ANY MULTIPLE DEPENDENT CLAIMS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
					TOTAL FILING FEE ->	\$750.00
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required in connection with this application, or credit any overpayment to ACCOUNT NO. 501519. A duplicate copy of this sheet is enclosed.						
<input checked="" type="checkbox"/> A check in the amount of <u>\$ 750.00</u> to cover the filing fee is enclosed.						

15. CORRESPONDENCE ADDRESS

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September 23, 2003

Commissioner for Patents
Mail Stop Patent Application
Box 1450
Alexandria, Virginia 22313-1450

Re: Proposed Patent Application for TORSTEN NIEDERDRÄNK, HERVE SCHULZ and TOM WEIDNER entitled "FEEDBACK COMPENSATION FOR HEARING DEVICES WITH SYSTEM DISTANCE ESTIMATION", for Attorney Docket No. P03,0381

SIR:

Under the provisions of 37 CFR § 1.41 (c), I am filing the attached application with 14 claims, abstract of the disclosure, 6 sheets of drawings, an unexecuted declaration, and a filing fee on behalf of TORSTEN NIEDERDRÄNK, HERVE SCHULZ and TOM WEIDNER, and request that the application papers be assigned a serial number and filing date.

On behalf of the inventor(s), I hereby claim priority from German Application No. 102 44 184.7 filed September 23, 2002.

I request that the application be assigned a Serial No. and Filing Date pursuant to the provisions of 37 C.F.R. § 1.53(b) and 37 C.F.R. § 1.53(f).

Respectfully submitted,



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